Taylor Transfer, Inc.
P.O. Box 699
Boardman, OR 97818
Phone (541)481-2736
Fax (541)481-2766
taylortransfer@centurytel.net

OFFICE OF CHIEF COUNSEL

7006 JUL 10 A 9:104

June 19, 2008

In regards to: Requesting Administrative Review of Safety Rating

U.S. DOT Dockets

U.S. DOT Department of Transportation

400 Seventh Street S.W., Room PL-401 Washington D.C. 20590

FMCSA-2008.0215

To Whom It May Concern:

I sent a letter concerning our Safety Rating based on the Factor 6 recordable accident rate on June 9, 2008. The accident in question occurred 9-19-07. We believe that this accident was a non-preventable accident on our part. I am sending a copy of the police report from the Oregon DMV and the official letter of our conditional rating. If you have any questions please contact either Wendy or Jami at (541)481-2736

Thank you,

Wendy Taylor

Taylor Transfer, Inc.

Owner, Secretary

Enclosure (5 pages)

UREGUN PULICE I KA	FFIU CHASH REPORT
SPOT-369640 9-19-07 DAY OF WEEK CRASH TIME	POLICE NOTIFIED AM POLICE ARRIVAL AM DMV FILE NUMBER" (10:34 PM 70:47 PM
HOOD RIVER INTERSTATE 84	MILE POST DMV CODE
WITHIN FEET N S OF NEAREST INTERSECTING ROAD	WITHIN FEET N S OF NEAREST CITY / TOWN
PROPERTY DAMAGE PROPERTY DAMAGE	NEAR 2 MILES (DW HOOD RIVER
UNIT NAME (LAST, FIRST, MIDDLE)	HAZARDOUS MATERIALS ☐ HIT AND RUN ☐ PHOTOS TAKEN ☐ TRAIN R/R ☐ TRUCK/BUS DRIVER LICENSE NUMBER STATE SEX RACE DOB
MARCH CHAN CHANGES	596 9849 02 m W 4-25-66
BIC 1511 E. 9" ST#C THE DAUES PRK VEHICLE OWNER	or 97088 (541) 296.4335
PRP W SAME FIRE STD SPD PST SPD INSURANCE COMPANY	WORK PHONE (SCB) 494-8707
EJECTED EXTRCTO VEHICLE IDENTIFICATION NUMBER (VIN) LICENSE PLATE NUMBER	73 17937 32 33
WELLOUIS TOWER ASSOCIATION OF THE PROPERTY OF	OPOR FUND WINDSTON YOU COLOR
BY: PLUTIS TOSE TO: The Deller VEHICLE DAMAGE	DRIVER TAKEN: Y UNKNOWN BY: TO:
DAMAGE ESTIMATE ROLLOVER	INJURY: A NONE POSSIBLE MINOR SERIOUS FATAL
UNDER \$1500 ☐ UNKNOWN	EQUIPMENT: NO EQPUSED LAPONLY 🗷 LAP/SHLDR CHLD RST-PRP ARAG-DEPLY
USE ARROW TO SHOW FIRST IMPACT (SHADE IN DAMAGED AREA)	□ NONE INSTLD □ UNKNOWN □ SHLDR ONLY □ HELMET □ CHLD RST-IMPR ■ ABAG-NOT DP
CHERECT NAME	AKA IN CUSTODY
ADDRESS SEX RACE DOB HT WT HAIR EYES LOC	OTHER INFORMATION:
SEX RACE DOB HT WT HAIR EYES LOC	CAL ID
UNIT NAME (LAST, FIRST, MIDDLE)	
LOVETT ROBERT MCNEW	DRIVER LICENSE NUMBER STATE SEX RACE DOB 2364660 GC M G) 11-1-51
PED ADDRESS	HOME PHONE
PRK VEHICLE OWNER	0197838 (S41)567-0805
PRP SAME TA YLON INDUSTRIES INC POBOK	GCE BOARDONNO OC (541) 481 - 2736 INSURANCE POLICY NUMBER
EJECTED EXTRCTO VEHICLE IDENTIFICATION NUMBER (VIN) LICENSE PLATE NUMBER	CO3 10-20-91
10 10 1x KW 280 23 1287 6917 7 15 P 020	STATE YEAR MAKE CO CO TT COLOR WHI / BIO
BY: UNKNOWN TO:	DRIVER TAKEN: Y NO UNKNOWN BY: TO:
DAMAGE ESTIMATE ROLLOVER	INJURY: NONE □ POSSIBLE □ MINOR □ SERIOUS □ FATAL
NONE ☐ UNDERCAR ☐ UNDER \$1500 ☐ TOTALED ☐ OVER \$1500 ☐ UNKNOWN	EQUIPMENT: NO EQPUSED LAP ONLY DIAP/SHLDR CHLD RST-PRP ARAG-DEPLYD
USE ARROW TO SHOW FIRST IMPACT (SHADE IN DAMAGED AREA)	☐ NONE INSTLD ☐ UNKNOWN ☐ SHLDR ONLY ☐ HELMET ☐ CHLD RST-IMPR ☐ ABAG-NOT DP
JNIT PASSENGER NAME	ADDRESS
SEX RACE DOB HOME PHONE WORK PHONE	INJURY POSSIBLE SERIOUS LOCATION OTHER: EJECTED EXTRCTD
PASSENGER TAKEN: Y N UNKNOWN	
NIT PASSENGER NAME	EQUIPMENT NO EOP USED □ LAP ONLY □ LAP / SHLDR □ CHLD RST-PRP □ A/BAG-DEPLYD □ NONE INSTLD □ UNKNOWN □ SHLDR ONLY □ HELMET □ CHLD RST-IMPR □ A/BAG-NOT DP ADDRESS
EX RACE DOB HOME PHONE WORK PHONE	
	INJURY ☐ POSSIBLE ☐ SERIOUS LOCATION OTHER: ■ EJECTED EXTRCTD ☐ NONE ☐ MINOR ☐ FATAL
Y: TO:	EQUIPMENT NO EQPUSED LAPONLY LAP/SHLDR CHLD RST-PRP ABAG-DEPLYD
PASSENGER NAME WITNESS	☐ MONE INSTED ☐ UNKNOWN ☐ SHEDR ONLY ☐ HELMET ☐ CHED RST-IMPR ☐ A/BAG-NOT DP
EX RACE DOB HOME PHONE WORK P. IOI.E	INJURY POSSIBLE SERIOUS LOCATION OTHER: EJECTED EXTRCTD
ASSENGER TAKEN: Y N UNKNOWN	EQUIPMENT NO EQPUSED LAPONLY LAPONLY LAPONLY LAPONLY
STRIBUTION TO:	□ NONF INSTLD □ UNKNOWN □ SHLDR ONLY □ HELMET □ CHLD RST-IMPR □ ABAG-NOT DP
FICER NAME / NUMBER	DATE AGENCY LAPROCESSIV
ONEILL M HOSAT 9-19	7-07 ORSCN STATE POUCI APPROPRIE

AGENIOV CODV

STK# 300018

1. 401-78-38-	10,2) PM	10:50 PM	АВ	c p	1.5.0
· M.	Check ONE box in	all categories. Che	ck ALL boxes that apply	V in categories with (+)	E 2 9
FIRST HARMFUL EVENON COLLISION		ROAD CHARACTER	*VEH RELATED FACTOR	RS TRUCK CONFIGURATION	
OVERTURN	CLEAR CLOUDY (OVERCAST)	#1 #2 STRAIGHT and LEVE		#1 #2	PEDESTRIAN TYPE NONE
FIRE / EXPLOSION	RAIN	☐ ☐ STRAIGHT w/ GRADE	□ □ BRAKES	TRUCK (2 or 3 AXLE) TRUCK / TRACTOR-SEN	
☐ IMMERSION☐ GAS INHALATION	SNOW SLEET / HAIL / ETC	☐ ☐ CURVED and LEVEL☐ ☐ CURVED w/ GRADE	☐☐ STEERING	☐ ☐ TRUCK and TRAILER	" L BICYCLIST /
☐ OTHER NON COLLISION	I ☐ FOG/SMOG	VEH # 1 2 NUMBER OF LA	POWER PLANT SUSPENSION	☐ ☐ DOUBLE TRAILERS☐ ☐ TRIPLE TRAILERS	CONVEYANCE WHEELCHAID
☐ MEDICAL (Explain)	☐ SMOKE ☐ BLOWING SAND / DIRT			DROMEDARY and SEAR	☐ ANIMAL RIPER
COLLISION WITH	☐ SEVERE CROSSWIND	VEH # 2 2 NUMBER OF LAI	NES EXHAUST	HEAVY HAUL CONFIG	RIDER ANIM DRAWN VEH
PEDESTRIAN	☐ OTHER / UNKNOWN	l ui	☐ ☐ SIGNALS	HEAVY HAUL CONFIG	OTHER (Explain)
☐ PARKED MOTOR VEHICE	SURFACE CONDITION	TOTAL NUMBER OF LAN	RESTRAINT SYSTEM)	
BICYCLIST	#1 #2	#1 #2		* PASSENGER FACTORS PASS UNIT #1	
CRASH TYPE	DRY	ONE WAY TRAFFIC	☐ ☐ CARGO		ENTER / CROSS ROAD WALK / RIDE w/TRAFF
REAR END	☐ ☐ SNOW / SLUSH	☐ NOT PHYSLY DIVIDED		NONE INTERFERED W/DRIVER	WALK/RIDE AGAINST
│ □ ANGLE │ □ SIDESWIPE	│ □ □ ICY │ □ □ MUDDY	MEDIAN TYPE	VEHICLE MOVEMENT	UNDER INFL - DRUGS	ILL STEP ON / OFF VENICE
☐ MANNER UNKNOWN	☐ ☐ DEBRIS	☐☐ UNPAVED	☐ ☐ BACKING	UNDER INFL - ALCOHOL	APPROACH LEAVE VEH
FIXED OBJECT BARRICADE	☐☐☐ RUTS / HOLES / BUMF☐☐☐ WORN / POLISHED	☐ ☐ PAVED	STOPPED STRAIGHT AHEAD	OTHER (Explain)	APPROACH/ LEAVE VEH WORK / DUSHING VEHICLE
☐ BOULDER / ROCK	LOW/SOFT SHOULDE	R CONTLEFT TURN	☐ TURNING RIGHT		☐ OTHER WORKING
☐ BRIDGE O/PASS or RAILIN☐ BUILDING	NG OTHER/UNKNOWN	DRIVER LICENSE VIOLATION	TURNING LEFT MAKING U-TURN	PASS UNIT #2	☐ PLAING ☐ SANDING
CULVERT HEADWALL		DRIVER	ENTER TRAFFIC LANF	NON	☐ ∠YING DOWN
CURBING DITCH	SURFACE TYPE #1 #2	#1#2	☐ ☐ LEAVE TRAFFIC LANE ☐ ☐ OVERTAKING	☐ ☐ INTERFERED W/DRIVER☐ ☐ UNDER INFL - DRUGS	PED / BIKE VISIBILITY
DIVIDER - CNCRT or STEE	L	■ NONE □ □ INSTRUCTION PERMIT	☐ ☐ CHANGING LANES	I LI LI MNDER INFL - ALCOHOL	CLOTHING
FENCE - NOT MEDIAN FIRE HYDRANT	BLACKTOP / ASPHALT	☐ ☐ LICENSE RESTRICTION	AVOIDING MANEUVER MERGING	UNKNOWN OTHER (Explain)	NO CONTRAST W/BKSTRND
☐ HIGHWAY GUARDRAII	☐ ☐ DIRT	☐ ☐ EXPIRED LICENSE☐ ☐ OUT OF CLASS	PARKING		☐ CONTRASTED WBKGRND☐ REFLECTIVE
☐ HIGHWAY SIGN☐ IMPACT ABSORBER	☐ OTHER	☐ ☐ SUSPNDED / REVOKED	NEGOTIATING A CURVE	PEDESTRIAN LOCATION	OTHER
☐ LIGHT STANDARD		☐ ☐ UNLICENSED	TRAILER TYPE	IN ROAD	OTHER LIGHT SOURCE
☐ MAILBOX ☐ OVERHEAD SIGN POST	LIGHT FULL DAYLIGHT		#1 #2 LOG BUNK	☐ IN X-WALK	* PED / BIKE FACTORS
I ☐ OVERHEAD STRUCTURE	DAWN	★ DRIVER FACTORS	SEMITRAILER	☐ NOT IN X-WALK ☐ NO X-WALK AVAILABLE	NONE
☐ PIER or COLUMN☐ RETAINING WALL	☐ DUSK ☐ DARK - LIGHTED WAY	#1#2	☐ ☐ POLE TRAILER ☐ ☐ FULL TRAILER	INTERSECTION /	FAILED TO YIELD ROW DISREGARD TRAFFIC SIGN
☐ SIDESLOPE EARTH	DADY NOTHING	☐ ☐ NONE☐ ☐ CELL PHONE USE	☐ ☐ MOBILE HOME	☐ IN X-WALK ☐ NOT IN X-WALK	L ILLEGALLY IN BOAR
☐ SIDESLOPE ROCK or STON☐ TRAFFIC SIGNAL POST	IE UNKNOWN	☐ ☐ OBSTRUCTED VIEW	UTILITY TRAILER TRAVEL TRAILER	☐ NO X-WALK AVAILABLE	☐ EQUIPMENT VIOLATION ☐ CLOTHING NOT VISIBLE
│		FAILED TO YIELD ROW DISRGRD TRAF SIGN	☐ ☐ BOAT TRAILER	OTHER NOT IN ROADWAY	UNDER INFC - DRUGS
UNDERPASS TUNNEL UTILITY POLE	TRAFFIC CONTROL TYPE	■ □ TOO FAST FOR COND	FARM EQUIPMENT HORSE TRAILER	☐ SHOWLDER	UNDER INFL - ALCOHOL UNKNOWN
OTHER FIXED (Explain)	#1 #2	☐ ☐ MADE IMPROPER TURN☐ ☐ WRONG SIDE/WAY	☐ ☐ VEHICLE IN TOW	D RIKE I ANE	OTHER (Explain)
	☐ ☐ SCHOOL BUS LIGHTS	☐ ☐ FOLLOW TOO CLOSELY	☐ ☐ OTHER/UNKNOWN	UNKNOWN	
OTHER OBJECT (NOT FIXED)	☐ OFFICER / CROSSING GUARD or FLAGGER	☐ ☐ IMPROPER LANE CHNG☐ ☐ IMPROPER BACKING	SKETCH &	NARRATIVE UNIT	1 2
☐ THROWN / FALLING ORJECT	T L TRAFFIC SIGNAL W/	☐ ☐ IMPROPER PASSING	1 1 — <i>1</i>	KID MARKS TO (FEET)	-
UNKNOWN OTHER OBJECT (Explain)	PEDESTRIAN CONTROL TRAFFIC SIGNAL	☐ ☐ IMPROPER PARKING		-	
- OTTETT OBULOT (Explain)	☐ ☐ FLASHING BEACON☐ ☐ STOP SIGN	FATIGUE / DROWSY	(NOT TO SCALE) DI	ISTANCE AFTER (FEET)	
EVENT LOCATION	■ ☐ ☐ YIELD SIGN	☐ ☐ UNKNOWN	VEH4 EVEH#7 (160	CTOSIO LIA FORE	
ON ROADWAY	RR CROSSING GATES	☐ ☐ OTHER	VEH#1 EVEH#2 WER		
NON-INTERSECTION INTERSECTION	☐☐☐ RR FLASHING SIGNAL		LICE ILICION CI	DRIVERY. IDIMINED & I	CLUSTED TO
☐ INTERSECTION RELATED☐ DRIVEWAY ACCESS	RR-CROSSING w/ PAVEMENT MARKINGS	★ IMPAIRMENT DRIVER	THINKS HE BEILL HALL	PEQ TENTINE	DENSED A
☐ INTERCHANGE AREA	LANE CONTRLS / LINES	#1#2	SHOUT DISTRICE DO	WN THE INTCOSTATE.	
☐ RAILROAD CROSSING ☐ BRIDGE	/STRIPES / DEVICES	NONE UNDER INFL - DRUGS			
│ □ TUNNEL	☐☐ OTHER REG SIGN	UNDER INFL - ALCOHOL		The state of the s	the first and the second of th
OTHER ON-ROAD AREA	☐ ☐ TURN LANES ☐ ☐ UNKNOWN	UNDER INFL - MEDS UNKNOWN	and the same formation of the first of the same	with the second second second second second second	row in the same of
SHOULDER			The same of the sa		
☐ TURNOUT ☐ ROADSIDE	DEVICE CONDITION	DETERMINED BY:			- Marie Carlotte Control Contr
BEYOND RIGHT OF WAY	#1 #2 M NO MALFUNCTION	☐ ☐ INTOXILYZER TEST ☐ ☐ BLOOD OR URINE TEST ☐	LONCOLTE	BARRICE T	
☐ MEDIAN ☐ DRIVEWAY	☐☐ DOWN/MISSING	☐ ☐ FIELD SOB. TEST 6	Company of the second s	O COLOR	
☐ PRIVATE DRIVE	☐ ☐ TURNED FROM PROPER POSITION	OBSERVED (SPEECH, ODOR, ETC.)			
☐ RAILROAD CROSSING ☐ OTHER OFF ROAD	☐ ☐ OBSCURED BY	☐ ☐ DRE EVALUATION +		THE RESIDENCE OF THE PROPERTY	
☐ PARKING LOT	□ □ OBSCURED BY	□ □ UNKNOWN	and the second of the second o		
UNKNOWN SPECIAL ZONE	PARKED VEHICLE	□ □ OTHER	- 1 - 1 - 1 - 1 - 1 - 1	ر الموسود المرسولية الماسود والموسود والموسود الماسود الماسود الماسود الماسود الماسود الماسود الماسود الماسود ا	and the second s
MONE:	OBSCURED BY VEGETATION		1012		
☐ CONSTRUCTION ☐ MAINTENANCE	LIGHTS MALFUNCTION	RESULTS OF TEST:		155	
☐ UTILITY	☐ ☐ GATES INOPERATIVE	D1% D2%	4.21.	رياض	tour for a median and a
SNOW SCHOOL	GATE ARM MISSING	☐ TEST REFUSED	And the second s		
☐ UNKNOWN WORK	☐ ☐ OTHER IMPAIRMENT	☐ ☐ TESTED FOR DF.UGS☐ ☐ RESLTS NOT AVAILABLE	the first the first		
OTHER	□ □ UNKNOWN	THEOLIO NOT AVAILABLE			

OREGON POLICE TRAF	FIC CRASH REPORT
POLICE INCIDENT: CASE NUMBER CRASH DATE DAY OF WEEK CRASH TIME M TOOTH F S SN 10.25	POLICE NOTIFIED POLICE ARRIVAL DMV FILE NUMBER 10:34 PM 10:47 PM
COUNTY ROAD ON WHICH CRASH OCCURRED	MILE POST DMV CODE
HOOD RIVER INTERSECTING ROAD	WITHIN FEET N S OF NEAREST CITY/TOWN
NEAR 2 MILES (E)W US 35	NEAR MILES (B.W HOOD RIUS (C.
PROPERTY DAMAGE DUBLIC PROPERTY DAMAGE NUMBER OF FATAL HUNIT NAME (LAST, FIRST, MIDDLE)	AZARDOUS MATERIALS
DEINEU S)	
PED ADDRESS BIC	HOME PHONE
PRK VEHICLE OWNER PRP SAME TASLOR INDUSTRIES INC	WORK PHONE
FIRE STD SPD PST SPD INSURANCE COMPANY Y N N NONE	INSURANCE POLICY NUMBER
EJECTED EXTRCTD VEHICLE IDENTIFICATION NUMBER (VIN) Y P N Y N PLEO 483 x JTA 08630 HP 34600	STATE YEAR MAKE MODEL/STYLE COLOR STATE YEAR MAKE STATE SEMI TRAILER STA
VEHICLE TOWED: Y UNKNOWN	DRIVER TAKEN: Y N UNKNOWN BY: TO:
VEHICLE DAMAGE DAMAGE ESTIMATE ☐ ROLLOVER	INJURY: NONE POSSIBLE MINOR SERIOUS FATAL
NONE ☐ UNDERCAR UNDER\$1500 ☐ TOTALED ☐ OVER\$1500 ☐ UNKNOWN	EQUIPMENT: NO EQP USED LAP ONLY LAP / SHLDR CHLD RST-PRP ABAG-DEPLYD
USE ARROW TO SHOW FIRST IMPACT (SHADE IN DAMAGED AREA)	☐ NONE INSTILD ☐ UNKNOWN ☐ SHLDR ONLY ☐ HELMET ☐ CHLD RST-IMPR ☐ A/BAG-NOT DP
SUSPECT NAME	AKA IN CUSTODY Y N
ADDRESS SEX RACE DOB HT WT HAIR EYES LOCA	OTHER INFORMATION:
SEX RACE DOB HT WT HAIR EYES LOCA	AL ID
UNIT NAME (LAST, FIRST, MIDDLE)	DRIVER LICENSE NUMBER STATE SEX RACE DOB
# ADDRESS	HOME PHONE
PED AUDIESS .	()
PRK VEHICLE OWNER PRP SAME	WORK PHONE
FIRE STD SPD PST SPD INSURANCE COMPANY Y N	INSURANCE POLICY NUMBER
EJECTED EXTRCTD VEHICLE IDENTIFICATION NUMBER (VIN) LICENSE PLATE NUMBER Y P N Y N	STATE YEAR MAKE MODEL/STYLE COLOR
VEHICLE TOWED: Y N UNKNOWN BY: TO:	DRIVER TAKEN: Y N ☐ UNKNOWN BY: TO: .
VEHICLE DAMAGE DAMAGE ESTIMATE ☐ ROLLOVER ☐ NONE ☐ UNDERCAR	INJURY: NONE POSSIBLE MINOR SERIOUS FATAL
UNDER \$1500 TOTALED OVER \$1500 UNKNOWN	EQUIPMENT: ☐ NO EQP USED ☐ LAP ONLY ☐ LAP / SHLDR ☐ CHLD RST-PRP ☐ ABAG-DEPLYD ☐ NONE INSTLD ☐ UNKNOWN ☐ SHLDR ONLY ☐ HELMET ☐ CHLD RST-IMPR ☐ ABAG-NOT DP
USE ARROW TO SHOW FIRST IMPACT (SHADE IN DAMAGED AREA)	ACTION/ARREST/CITES
UNIT	ADDRESS
SEX RACE DOB HOME PHONE WORK PHONE	INJURY ☐ POSSIBLE ☐ SERIOUS LOCATION OTHER: EJECTED EXTRCTD ☐ NONE ☐ MINOR ☐ FATAL LR CR RR Y P N Y N
PASSENGER TAKEN: Y N UNKNOWN BY: TO:	EQUIPMENT ☐ NO EQPUSED ☐ LAP ONLY ☐ LAP/SHLDR ☐ CHLD RST-PRP ☐ ABAG-DEPLYD ☐ NONE INSTLD ☐ UNKNOWN ☐ SHLDR ONLY ☐ HELMET ☐ CHLD RST-IMPR ☐ ABAG-NOT DP
UNIT	ADDRESS
SEX RACE DOB HOME PHONE WORK PHONE ()	INJURY ☐ POSSIBLE ☐ SERIOUS LOCATION OTHER: EJECTED EXTRCTD ☐ NONE ☐ MINOR ☐ FATAL ☐ LR CR RR Y P N Y N
PASSENGER TAKEN: Y N UNKNOWN BY: TO:	EQUIPMENT NO EQPUSED LAP ONLY LAP / SHLDR CHLD RST-PRP A/BAG-DEPLYD NONE INSTLD UNKNOWN SHLDR ONLY HELMET CHLD RST-IMPR A/BAG-NOT DP
UNIT PASSENGER NAME WITNESS	A)LRESS
SEX RACE DOB HOME PHONE WORK PHONE	INJURY ☐ POSSIBLE ☐ SERIOUS LOCATION OTHER: EJECTED EXTRCTD ☐ NONE ☐ MINOR ☐ FATAL LR CR RR - Y P N Y N
PASSENGER TAKEN: Y N UNKNOWN BY: TO:	EQUIPMENT NO EQP USED LAP ONLY LAP / SHLDR CHLD RST-PRP A/BAG-DEPLYD NONE INSTLD UNKNOWN SHLDR ONLY HELMET CHLD RST-IMPR A/BAG-NOT DP
DISTRIBUTION	CONTROLLE CONTRO
OFFICER NAME / NUMBER ONEILL M- 40527 9	DATE AGENCY Organ State Palice APPROVED BY
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

The state of the s	Check ONE box in			C D	E 4 Fig.
FIRST HARMFUL EVEN		ROAD CHARACTER	K ALL boxes that appl	y in categories with (*)	
NON COLLISION	□ CLEAR	#1 #2	*VEH RELATED FACTOR	TRUCK CONFIGURATION	
OVERTURN	☐ CLOUDY (OVERCAST)	☐ ☐ STRAIGHT and LEVEL	☐ ☐ JMONE	#1 #2	□ NONE □ PEDESTRIAN
☐ FIRE / EXPLOSION ☐ IMMERSION	☐ RAIN ☐ SNOW	STRAIGHT w/ GRADE CURVED and LEVEL	│	☐ ☐ TRUCK / TRACTOR-SEN	PEDESTRIAN BICYCLIST
☐ GAS INHALATION	SLEET / HAIL / ETC	CURVED w/ GRADE	☐☐☐ STEERING☐☐☐ POWER PLANT	☐ ☐ TRUCK and TRAILER	CONVEYANCE
OTHER NON COLLISION	☐ FOG / SMOG	1	☐ ☐ SUSPENSION	☐ ☐ DOUBLE TRAILERS. ☐ ☐ TRIPLE TRAILERS	WHEELCHAIR
☐ MEDICAL (Explain)	SMOKE	VEH # 1 NUMBER OF LANE		☐ ☐ DROMEDARY and SEMI	
	☐ BLOWING SAND / DIRT☐ SEVERE CROSSWIND	VEH # 2 NUMBER OF LANE	ES	☐ ☐ HEAVY HAUL CONFIG ☐ ☐ BUS	L UNKNOWN
COLLISION WITH	OTHER / UNKNOWN		☐ ☐ SIGNALS	I □ □ OTHER	OTHER (Explain)
☐ PEDESTRIAN ☐ PARKED MOTOR VEHICLE		TOTAL NUMBER OF LANE	s WINDOWS/WINDSHL	D	
☐ RAILWAY TRAIN	SUMPACE CONDITION		S U WINDOWS / WINDSHL RESTRAINT SYSTEM WHEELS	* PASSENGER FACTORS	* PEDESTRIAN ACTION
BICYCLIST	#1 #2	#1 #2	□□□ COUPLING	PASS UNIT #1 #2	☐ ENTER / CROSS ROAD
CRASH TYPE ☐ HEAD ON	│ □ □ WET	ONE WAY TRAFFIC NOT PHYSLY DIVIDED	CARGO OTHER	☐ ☐ NONE	☐ WALK / RIDE w/TRAFF
☐ REAR END	SNOW / SLUSH	La La Martinida de la Militaria	☐ ☐ OTHER VEHICLE MOVEMENT	☐ ☐ INTERFERED w/DRIVER☐ ☐ UNDER INFL - DRUGS	☐ WALK / RIDE AGAINST☐ STEP ON / OFF VEHICLE
☐ ANGLE ☐ SIDESWIPE	MUDDY	MEDIAN TYPE	#1 #2	UNDER INFL - ALCOHOL	STEP ON / OFF SCH BUS
☐ MANNER UNKNOWN	DEBRIS	UNPAVED	☐ ☐ BACKING	□ □ UNKNOWN	APPRCH / LEAVE SC BUS
TIXED OBJECT	☐☐RUTS/HOLES/BUMF☐☐WORN/POLISHED	BARRIER PAVED	STOPPED	OTHER (Explain)	APPROACH / LEAVE VEH WORK / PUSHING VEHICLE
BARRICADE	☐☐ WORN / POLISHED☐☐ LOW / SOFT SHOULDE		STRAIGHT AHEAD TURNING RIGHT		OTHER WORKING
☐ BOULDER / ROCK ☐ BRIDGE O/PASS or RAILING			☐ ☐ TURNING LEFT	PASS UNIT #2 #1 #2	☐ PLAYING
☐ BUILDING	1	DRIVER LICENSE VIOLATION	MAKING U-TURN	1#1 #2	STANDING LYING DOWN
CULVERT HEADWALL	CUDE AGE TYPE	DRIVER	☐ ☐ ENTER TRAFFIC LANE	☐ ☐ NONE ☐ ☐ INTERFERED w/DRIVER	☐ UNKNOWN
☐ CURBING ☐ DITCH	SURFACE TYPE . #1 #2	#1#2	OVERTAKING	☐ ☐ UNDER INFL - DRUGS	PED / BIKE VISIBILITY
DIVIDER - CNCRT or STEEL	│ □ □ CONCRETE	□□ NONE □□ INSTRUCTION PERMIT	☐ ☐ CHANGING LANES	UNDER INFL - ALCOHOL	CLOTHING
☐ FENCE - NOT MEDIAN	☐ ☐ BLACKTOP / ASPHALT	☐☐☐ LICENSE RESTRICTION	AVOIDING MANEUVER	UNKNOWN OTHER (Explain)	☐ NO CONTRAST w/BKGRND
☐ FIRE HYDRANT ☐ HIGHWAY GUARDRAIL	GRAVEL DIRT	☐ ☐ EXPIRED LICENSE	PARKING	La La Official (Explain)	☐ CONTRASTED W/BKGRND☐ REFLECTIVE
HIGHWAY SIGN	OTHER	U OUT OF CLASS SUSPNDED / REVOKED	☐ ☐ NEGOTIATING A CURVE		OTHER
IMPACT ABSORBER		UNLICENSED	OTHER	PEDESTRIAN LOCATION	OTHER LIGHT SOURCE
J LIGHT STANDARD J MAILBOX	LIGHT	_ _	TRAILER TYPE	IN ROAD	☐ NNKNOWN
OVERHEAD SIGN POST	☐ FULL DAYLIGHT	* DRIVER FACTORS		☐ IN X-WALK ☐ NOT IN X-WALK	★ PED / BIKE FACTORS
OVERHEAD STRUCTURE	☐ DAWN	DRIVER PACTORS	□ □ SEMITRAILER	☐ NO X-WALK AVAILABLE	NONE
PIER or COLUMN RETAINING WALL	I □ DUSK	#1#2	☐ ☐ POLE TRAILER ☐ ☐ FULL TRAILER	INTERSECTION	☐ FAILED TO YIELD ROW☐ DISREGARD TRAFFIC SIGN
SIDESLOPE EARTH	DARK - LIGHTED WAY	□ □ NONE	MOBILE HOME	☐ IN X-WALK ☐ NOT IN X-WALK	I ☐ ILLEGALLY IN ROAD
SIDESLOPE ROCK or STONE	DARK - NOT LIGHTED UNKNOWN	☐☐☐ CELL PHONE USE☐☐☐☐ OBSTRUCTED VIEW	☐ ☐ UTILITY TRAILER	NO X-WALK AVAILABLE	☐ EQUIPMENT VIOLATION ☐ CLOTHING NOT VISIBLE
J TRAFFIC SIGNAL POST TREE		☐ ☐ FAILED TO YIELD ROW	☐ ☐ TRAVEL TRAILER ☐ ☐ BOAT TRAILER	OTHER	UNDER INFL - DRUGS
UNDERPASS TUNNEL	TRAFFIC CONTROL TYPE	DISRGRD TRAF SIGN TOO FAST FOR COND	☐ ☐ FARM EQUIPMENT	☐ NOT IN ROADWAY ☐ SHOULDER	UNDER INFL - ALCOHOL
] UTILITY POLE	#1 #2	TOO FAST FOR COND MADE IMPROPER TURN	☐ ☐ HORSE TRAILER	☐ MEDIAN	☐ UNKNOWN
OTHER FIXED (Explain)	□ □ NONE		☐ ☐ VEHICLE IN TOW		
		│ □ □ WRONG SIDE/WAY	CT C	│ □ BIKE LANE	OTHER (Explain)
THER OBJECT (NOT FIXED)	☐ ☐ SCHOOL BUS LIGHTS	☐ ☐ WRONG SIDE/WAY ☐ ☐ FOLLOW TOO CLOSELY	OTHER/UNKNOWN	☐ BIKE LANE ☐ UNKNOWN	UTHER (Explain)
ODULOT (NOT FIXED)	OFFICER / CROSSING	FOLLOW TOO CLOSELY	OTHER/UNKNOWN	☐ NKNOMN	
ANIMAL	GUARD or FLAGGER	☐ ☐ FOLLOW TOO CLOSELY ☐ ☐ IMPROPER LANE CHNG ☐ ☐ IMPROPER BACKING ☐ ☐ IMPROPER PASSING	OTHER/UNKNOWN SKETCH &	NARRATIVE UNIT	
ANIMAL THROWN / FALLING OBJECT UNKNOWN	GUARD or FLAGGER GUARD or FLAGGER TRAFFIC SIGNAL w/ PEDESTRIAN CONTROL	FOLLOW TOO CLOSELY FOLLOW TOO CLOSELY MPROPER LANE CHING FINE MPROPER BACKING FINE MPROPER PASSING FINE MPROPER SIGNAL	OTHER/UNKNOWN SKETCH &	☐ NKNOMN	
ANIMAL THROWN / FALLING OBJECT UNKNOWN	OFFICER / CROSSING GUARD or FLAGGER TRAFFIC SIGNAL W PEDESTRIAN CONTROL TRAFFIC SIGNAL	FOLLOW TOO CLOSELY IMPROPER LANE CHING IMPROPER BACKING IMPROPER PASSING IMPROPER SIGNAL IMPROPER PARKING	OTHER / UNKNOWN SKETCH &	NARRATIVE UNIT SKID MARKS TO (FEET)	
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ANIMAL THROWN / FALLING OBJECT UNKNOWN	OFFICER / CROSSING GUARD or FLAGGER TRAFFIC SIGNAL w/ PEDESTRIAN CONTROL TRAFFIC SIGNAL FLASHING BEACON STOP SIGN UP 1 YIELD SIGN	FOLLOW TOO CLOSELY FOLLOW TOO CL	OTHER / UNKNOWN SKETCH &	NARRATIVE UNIT SKID MARKS TO (FEET)	
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U.S. Department of Transportation

Federal Motor Carrier Safety Administration

WENDY TAYLOR
VICE PRESIDENT
TAYLOR TRANSFER INC
TAYLOR TRANSFER
PO BOX 699
BOARDMAN, OR 97818-0699

1200 New Jersey Ave., S.E. Washington, DC 20590

June 6, 2008 In reply refer to: Your USDOT No.: 1000653 Review No.: 635643/CR

Dear WENDY TAYLOR:

The motor carrier safety rating for your company is:

CONDITIONAL

This CONDITIONAL rating is the result of a review and evaluation of your safety fitness completed on May 23, 2008. A CONDITIONAL rating indicates that your company does not have adequate safety management controls in place to ensure compliance with the safety fitness standard that could result in occurrences of violations listed in 49 C.F.R. 385.5(a-k).

Immediate action must be taken to correct any deficiencies or violations discovered during the compliance review. Your operation was found to be deficient with respect to the applicable safety regulations in the following areas:

Part 396 INSPECTION, REPAIR AND MAINTENANCE

Part 395 HOURS OF SERVICE OF DRIVERS

RECORDABLE CRASH RATE

Please refer to the copy of the compliance review left at your office for more specific guidance regarding areas in need of corrective action.

You may obtain further information from the local Federal Motor Carrier Safety Administration office listed below:

U.S. Department of Transportation Federal Motor Carrier Safety Administration THE EQUITABLE CENTER 530 CENTER STREET, NE, SUITE 100 SALEM, OR 97301 Telephone No.: 503-399-5775

You may request the Federal Motor Carrier Safety Administration to perform an administrative review of a proposed or final safety rating or you may request a change to a proposed or final safety rating based upon corrective action. The procedures and the time limites are described in 49 C.F.R. 385.15 and 385.17, respectively.

William A. Quade

Associate Administrator for Enforcement

Willing Com

and Program Delivery